# Routine Influenza Algorithm Michigan Department of Community Health Instructions for Clinical Labs

NOTE: MDCH performs routine year round surveillance for influenza. Please visit the MDCH website at www.michigan.gov/flu and MIHAN for updates.

<sup>‡</sup> Criteria for novel/avian influenza testing include **Routine Influenza Testing:** signs and symptoms suggestive of influenza Routine surveillance through laboratories and \* Acceptable s pecimens (fever, headache, tiredness, for routine seasonal flu: physicians enrolled in Sentinel Surveillance cough, sore throat, muscle NP wash, bronchial Program. See page 2 of this algorithm if aches, and radiograph lavage, NP swab, throat evidence of pneumonia) patient meets criteria for testing<sup>‡</sup> for novel swab. and travel to an area with influenza.8 confirmed human cases of Postmortem specimens: avian influenza and direct parafin-embedded or or unprotected exposure to formalin-fixed Collect acceptable specimen \* or isolate infected birds (including respiratory tissue. and ship to MDCH immediately with feathers, feces and under-Consult MDCH Bureau cooked meat and egg frozen cold packs. of Epidemiology at (517) products). For a current 335-8165 prior to listing of affected areas, go submitting samples. to www.pandemicflu.gov Viral respiratory culture performed at **MDCH** Negative Positive Further viral characterization, i.e., Result reported via MDCH Influenza A subtyping, performed at **Laboratory Information** MDCH. If results indicate novel/avian strain isolate will be sent to CDC. Management System (LIMS). <sup>8</sup> A **novel Influenza subtype** is one that Result reported via MDCH LIMS. has not previously been circulating in the human population, resulting in a population that is immunologically naïve

to the virus.

# Novel/Avian Influenza Algorithm Michigan Department of Community Health Instructions for Clinical Labs

NOTE: This algorithm will be updated as necessary. Please visit the MDCH website at <a href="www.michigan.gov/flu">www.michigan.gov/flu</a> and MIHAN for updates and for BioSafety Guidelines in collecting and handling of specimens.

### Novel/Avian Influenza Suspect Case:

Patient risk assessment (see <sup>‡</sup> ) and pre-approval for Novel/Avian Influenza testing required from Bureau of Epidemiology (BOE), 517-335-8165 or 517-335-9030 after hours.

Collect specimens (see <sup>®</sup>) and ship to MDCH immediately with frozen cold packs. The submitting lab should **not** set-up or order viral cultures but may continue with routine culture testing for alternative non-viral agents. Samples should be submitted to MDCH for novel influenza testing **regardless** of results of other influenza tests (i.e., even if rapid flu tests are negative).

PCR at MDCH for Flu A (H1, H3 and H5 subtypes), And Flu B

Flu A +, H1 or H3+, OR B +, and H5 -

BOL to telephone BOE. Result reported via MDCH LIMS.

Viral culture or further viral characterization may proceed at MDCH or submitter laboratory depending on resources. (Sputum specimens are unacceptable for viral culture.)

Viral
culture
result
reported
via
MDCH
LIMS. 08/05/2006

Flu A+ and **H5** +

BOL to telephone BOE/OPHP. Local health department (LHD) and submitter notification by BOE.

**DO NOT PERFORM VIRAL CULTURE.** Result reported via MDCH LIMS.

Specimens sent to CDC for confirmation.

Flu A+ **but** H1-, H3-, H5-

BOL to telephone BOE. **DO NOT PERFORM VIRAL CULTURE.** 

Result reported via MDCH LIMS.

Specimens sent to CDC for confirmation.

BOL will report CDC result upon

receipt.

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<sup>®</sup> Multiple sample types collected over multiple days are recommended including OP swabs, sputum, bronchial lavage. NP and nasal swabs are acceptable but less productive than other sample types. DO NOT SUBMIT ONLY SPUTUM.

Postmortem Specimens: Parafin-embedded or formalin-fixed respiratory tissue. Consult MDCH Bureau of Epidemiology at (517) 335-8165 prior to submitting samples.

## Pandemic Influenza Algorithm Michigan Department of Community Health Instructions for Clinical Labs

NOTE: This algorithm is to be used once sustained human-to-human transmission has occurred. It will be updated as necessary. Testing beyond H5 will depend on resources and surveillance needs. Please visit the MDCH website at <a href="https://www.michigan.gov/flu">www.michigan.gov/flu</a> and MIHAN for updates.

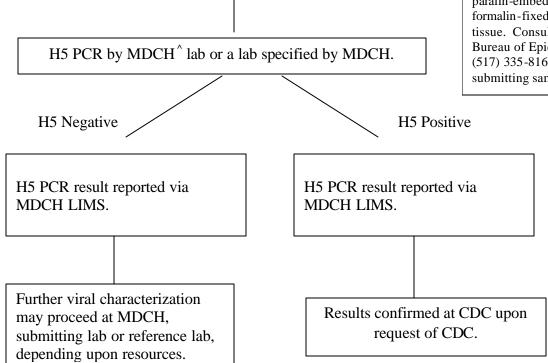
# Multiple sample types

#### Pandemic Influenza Suspect Case – H5 Screen:

Ship acceptable specimens (see #) to MDCH immediately with frozen cold packs. Submitter should retain an aliquot and proceed with additional viral testing only after notification of negative H5 results. Consider H5 testing regardless of results of other influenza tests (i.e., even if rapid flu tests are negative).

collected over multiple days are recommended including OP swabs, sputum, bronchial lavage. NP and nasal swabs are acceptable but less productive than other sample types. DO NOT SUBMIT ONLY SPUTUM.

Postmortem specimens: parafin-embedded or formalin-fixed respiratory tissue. Consult MDCH Bureau of Epidemiology at (517) 335-8165 prior to submitting samples.



<sup>^</sup> Bureaus of Laboratories and of Epidemiology will jointly determine when routine H5 testing is no longer indicated. Testing for surveillance purposes will continue as needed. Further guidance on testing will be provided at that time.